ons.	8				PTO/SI	
PESITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2005 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)			6(a) Docke	Docket Number (Optional) 021825-004		
Application Number 10/084,892			Filed	Filed February 27, 2002		
	GENE EXPRESSION PROFILING OF INFLAMMA EASE	TORY BOWE	≣L ————			
Art Unit 1639			Exam	Examiner Ponnaluri, P.		
	is a request under the provisions of 37 CFR 1.136(a cation.	a) to extend t	he period for	filing a reply ir	n the above identi	
The	requested extension and fee are as follows (check t	ime period d	esired and en	ter the approp	oriate fee below):	
		<u>Fee</u>	<u>Sı</u>	mall Entity Fee	<u>e</u>	
	One month (37 CFR 1.17(a)(1))	\$120		\$60	\$	
	Two months (37 CFR 1.17(a)(2))	\$450		\$225	\$ 225	
	Three months (37 CFR 1.17(a)(3))	\$1020		\$510	\$	
	Four months (37 CFR 1.17(a)(4))	\$1590		\$795	\$	
	Five months (37 CFR 1.17(a)(5))	\$2160		\$1080	\$	
\boxtimes	Applicant claims small entity status. See 37 CFR	1.27.				
	A check in the amount of the fee is enclosed.	1 04	/20/2005 AKEL	ECH1 00000003	201430 1008489	
	Payment by credit card. Form PTO-2038 is attack	hed.	FC:2252	225.00 DA		
\boxtimes	The Director has already been authorized to charge	ge fees in this	s application t	to a Deposit A	ccount.	
\boxtimes	The Director is hereby authorized to charge any for Deposit Account Number 20-1430 WARNING: Information on this form may become public Provide credit card information and authorization on PT	I ha	ve enclosed a	a duplicate co	py of this sheet.	
l a	m the applicant/inventor.					
	assignee of record of the entire i Statement under 37 CFR 3.7					
	attorney or agent of record. Reg	gistration Nun	nber <u>39,381</u>			
	attorney or agent under 37 CFR					
	Registration number if acting un	der 37 CFR 1.3	34		-	
	Jan L			April	15, 2005	
	Signature				Date	
	\ /					
	Joseph R. Snyder, Reg. No. 39,381	1		925 4	472-5000	

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

Total of ______ forms are submitted.